
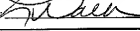


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| Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481). <h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2009</h2> | | Complete If Known Application Number 09/485,005-Conf. #1379 Filing Date September 11, 2000 First Named Inventor Erich Wanker Examiner Name G. Gabel Art Unit 1641 Attorney Docket No. V0179.70001US00 | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 755.00 | | | |

| | |
|--|--|
| METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |
|--|--|

| FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|------------------|---------------------------|-----------------------|---------------|-----|-----------------|--------------|--|---|---------------|---------|--|--------------------------------|-----|---------------------------|-------------|-----|--------------|--|----------|---------------|---------------------------|----------|---------------|------------|----|-----|-----|-----|-----|---|---|--|--|----------|-----------------------|-----|-----|---------------|--------------|----------|---------------|-----|-----|---|-----------|---|---|--|--|--|--|---|--|--|--|--|--|--|
| | FILING FEES <table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>330</td><td>165</td></tr> <tr><td>Design</td><td>220</td><td>110</td></tr> <tr><td>Plant</td><td>220</td><td>110</td></tr> <tr><td>Reissue</td><td>330</td><td>165</td></tr> <tr><td>Provisional</td><td>220</td><td>110</td></tr> </tbody> </table> | | Application Type | Fee (\$) | Small Entity Fee (\$) | Utility | 330 | 165 | Design | 220 | 110 | Plant | 220 | 110 | Reissue | 330 | 165 | Provisional | 220 | 110 | SEARCH FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>540</td><td>270</td></tr> <tr><td>100</td><td>50</td></tr> <tr><td>330</td><td>165</td></tr> <tr><td>540</td><td>270</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> | | Fee (\$) | Small Entity Fee (\$) | 540 | 270 | 100 | 50 | 330 | 165 | 540 | 270 | 0 | 0 | EXAMINATION FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>220</td><td>110</td></tr> <tr><td>140</td><td>70</td></tr> <tr><td>170</td><td>85</td></tr> <tr><td>650</td><td>325</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> | | Fee (\$) | Small Entity Fee (\$) | 220 | 110 | 140 | 70 | 170 | 85 | 650 | 325 | 0 | 0 | Fees Paid (\$) | | | | | | | | | | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Utility | 330 | 165 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design | 220 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plant | 220 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reissue | 330 | 165 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Provisional | 220 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 540 | 270 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100 | 50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 330 | 165 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 540 | 270 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 220 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 140 | 70 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 170 | 85 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 650 | 325 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXCESS CLAIM FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Each claim over 20 (including Reissues)</td><td>52</td><td>26</td></tr> <tr><td>Each independent claim over 3 (including Reissues)</td><td>220</td><td>110</td></tr> <tr><td>Multiple dependent claims</td><td>390</td><td>195</td></tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Multiple Dependent Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 20 or HP</td> <td>x</td> <td>=</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="7">HP = highest number of total claims paid for, if greater than 20.</td> </tr> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <td colspan="3"></td> </tr> <tr> <td>- 3 or HP</td> <td>x</td> <td>=</td> <td></td> <td colspan="3"></td> </tr> <tr> <td colspan="7">HP = highest number of independent claims paid for, if greater than 3</td> </tr> </tbody> </table> | | | | | | | | Fee Description | Fee (\$) | Small Entity Fee (\$) | Each claim over 20 (including Reissues) | 52 | 26 | Each independent claim over 3 (including Reissues) | 220 | 110 | Multiple dependent claims | 390 | 195 | Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) | - 20 or HP | x | = | | | | | HP = highest number of total claims paid for, if greater than 20. | | | | | | | Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | | - 3 or HP | x | = | | | | | HP = highest number of independent claims paid for, if greater than 3 | | | | | | |
| Fee Description | Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Each claim over 20 (including Reissues) | 52 | 26 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Each independent claim over 3 (including Reissues) | 220 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple dependent claims | 390 | 195 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - 20 or HP | x | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - 3 or HP | x | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </tbody> </table> | | | | | | | | Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | - 100 = | /50 = | (round up to a whole number) x | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - 100 = | /50 = | (round up to a whole number) x | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2501 Utility issue fee 755.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|--|--|--|------------------------|
| SUBMITTED BY Signature  | | Registration No. (Attorney/Agent) 52,560 | Telephone 817.646.8000 |
| Name (Print/Type) MaryDils S. Anderson, Ph.D. | | Date August 19, 2009 | |

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|---|--|---|
| Certificate of Electronic Filing Under 37 CFR 1.8 I hereby certify that this paper (along with any paper referred to as being attached or attached) is being transmitted via the Office electronic filing system in accordance with § 1.9(a)(4). Dated: August 19, 2009 | | Signature  (Lisa A. Walsh) |
|---|--|---|